



Management Presentation

August 2025



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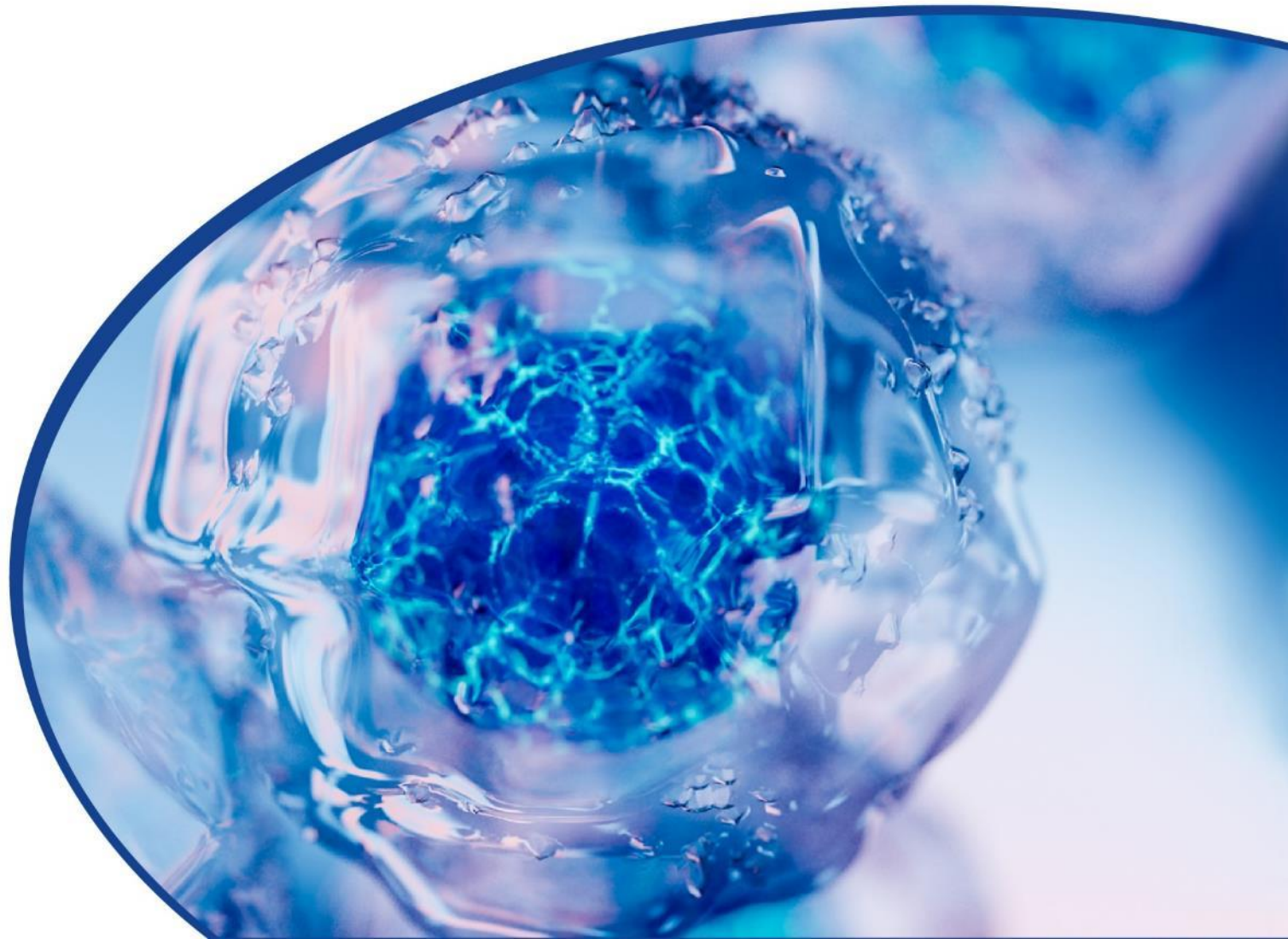
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Company Overview

SECTION 1



Hengrui: A Leading Global Biopharma

Leading Position

**No.1 in the World's 2nd
Largest Pharma Market¹**

Listed in 2025 Fortune China 500

Global Top 50

By Pharm Exec for 7 Consecutive Years²

No.1 in China

By Market Cap (US\$55Bn+)³



Innovation Powerhouse

No.1 in China

23 Commercialized NME Drugs⁴

Global Top 2

By Originated Pipeline Size⁵

No.1 in China

By NME Drug Candidates⁶



Global Recognition

MNCs' Vote of Confidence

15 Out-licensing Deals⁷

Total Deal Value US\$26Bn+⁸

**LARGEST EVER
China Out-licensing Deal⁴**

US\$12Bn Deal with GSK⁹

**LARGEST EVER
Chinese Pharma NewCo Deal⁴**

US\$6Bn Deal with Kailera



Notes: 1. No.1 in China in terms of multiple perspectives, including market cap, number of commercialized innovative drugs, and number of drugs in clinical or later stages of development; 2. As of 2025; 3. In terms of market capitalization among public pharmaceutical companies in China as of August 20, 2025; 4. As of July 31, 2025; 5. Originated pipeline size ranked by Citeline in 2025; 6. According to Frost & Sullivan. In clinical or later stages of development; 7. From 2018 to July 31, 2025; 8. Including equity value of Kailera; 9. In terms of total deal value of a single transaction. Total deal value include upfront payment and milestone payments, assuming all programs are optioned and all milestones are achieved

1H2025 Results Updates

Significant achievements across commercialization, pipeline delivery, global expansion and financials



Excellent Commercialization

6 NEW NME Drugs Launched

Recaticimab (PCSK9)
Ivamacitinib (JAK1)
Trastuzumab rezetecan (HER2 ADC)
Famitinib (VEGFR2/c-Kit/ PDGFR)

Fosrolapitant and Palonosetron Hydrochloride (NK-1RA/5-HT3RA)
Retaglipitin Phosphate and Metformin Hydrochloride (DPP-4/Metformin)

+ 6 NEW NME Indications Approved

Camrelizumab (PD-1)
Vunakizumab (IL-17A)
Tegileridine (MOR)
Ivamacitinib (JAK1) * 3



Strong Pipeline Delivery

15
New to Ph1

22
Ph1 -> Ph2

10
Ph2 -> Ph3

5
NDA/BLA
Submissions

12
NDA/BLA
Approvals



Expanding Global Footprint

Up to 12 Innovative Programs
(incl. PDE3/4)
US\$12Bn
GSK

Lp(a)
US\$2Bn
MSD

GnRH
EUR15MM¹
+ Milestone + Royalties
Merck KGaA



Robust Financials

~RMB15.8Bn
Total Revenue
+15.9% YoY

~RMB7.6Bn
Sales of Innovative Drugs
+23.1% YoY
~55.3% of Drug Sales

~RMB2.0Bn
Licensing Revenue
+43.2% YoY
~12.6% of Total Revenue

~RMB0.6Bn
Overseas Drug Sales
+67.0% YoY



Note: 1. Out-licensed Mainland China right; upfront payment of EUR15MM, other payments not disclosed

Recent Policy Trends Encouraging Innovative Drug Development

Support for innovation from payment side, with the development of commercial health insurance as a primary driver



Favorable Policies



NRDL and Commercial Insurance Innovative Drug List (Category C)

NHSA released the preliminary shortlist in August 2025



Measures to Support the High-Quality Development of Innovative Drugs

Released by NHSA and NHC in June 2025



Full-chain Support for the Development of Innovative Drugs

Approved by the State Council in July 2024



Support For Innovation



Multi-Payer System



Support For Healthcare Investment



Expand Market Accessibility



Accelerating R&D Progress



Hengrui Strategies



Focus on innovation and FIC/BIC assets



Optimize pathways of commercialization



Explore innovative payment models



Our Diversified Innovative Pipeline across Targeted Therapeutic Areas

Broad TA with focus on 4

In-depth potential FIC/BIC programs

Accelerating NDA/BLAs in near-term
High-quality early-stage pipelines to fuel future growth

| Oncology | | | | | Metabolic / Cardiovascular | | Immunological / Respiratory | | Neuro | Others | | |
|--|--------|--------------------------------------|--|--------|---|----------------|---|---|---|--|---|---|
| Small Molecule | | | mAbC | ADC | Metabolic | Cardiovascular | Immunological | Respiratory | | | | |
| Apatinib VEGFR GAC / GEJA / HCC / BC | ★ | HRS-2398 ATR Solid Tumor | Camrelizumab PD-1 cHL / HCC / NSCLC / NPC / CC / EC | ★ ★ | Trastuzumab Rezetecan HER2 ADC BC / GAC / GEJA / NSCLC / CRC / BTC / Gynecological Malignancies | ★ | Retagliptin DPP-4 T2D | Recaticimab PCSK9 Hypercholesterolemia / Dyslipidemia | Vunakizumab IL-17A PsO / PsA / AS | SHR-1703 IL-5 Eosinophilic Asthma / EGPA | Tegileridine MOR Analgesia / Pain Management | Oteseconazole CYP51 VVC |
| Pyrotinib EGFR / HER2 / HER4 BC / NSCLC | ★ | HRS-1167 PARP1 PC / OC | Adebrelimab PD-L1 SCLC / NSCLC / CC / HCC / GAC / EC / BTC | ★ | SHR-A2102 Nectin-4 ADC UC / NSCLC / EC / Gynecological Malignancies | ★ | Henagliflozin SGLT-2 T2D / CKD | SHR-1918 ANGPTL3 Hypercholesterolemia / HL | Imrexcoib COX2 Osteoarthritis-related Pain | SHR-1905 TSLP Asthma / COPD / CRSwNP | Remimazolam GABAa Sedation / Anesthesia | SHR8058 * Perfluorohexyloctane DED |
| Fuzuloparib PARP1/2 OC / FTC / PPC / BC / mCRPC | ★ | HRS-6209 CDK4 BC | SHR-2005 Bladder Cancer | | SHR-A1904 Claudin 18.2 ADC GAC / GEJA / PDAC | | Retagliptin Phosphate and Metformin Hydrochloride DPP-4 / Metformin T2D | SHR-2004 FXI VTE / Stroke / Systemic Embolism | Ivarmacitinib JAK1 AS / RA / PsA / AD / AA / nr-axSpA / UC / Vitiligo | RSS0343 NCFB | SHR-1707 Aβ AD | HRS-8427 Cefiderocol Derivatives cUTI / Pulmonary Infection |
| Dalpiciclib CDK4/6 BC | ★ | HRS-4642 KRAS G12D Solid Tumor | BsAb | | SHR-A2009 HER3 ADC NSCLC | ★ | INS068 Insulin T2D | HRS-1893 Myosin HCM | SHR-1819 IL-4Rα AD / PN / CSU | SHR-4597 Asthma | HRS8179 SUR1 Cerebral Edema | SHR7280 GnRH COH |
| Rezvilutamide AR mHSPC | ★ | HRS-2189 KAT6 BC | SHR-2017 Prevention of SRE in Solid Tumor | | SHR-A1921 TROP2 ADC OC | ★ ★ | SHR4640 URAT1 Gout and Hyperuricemia | HRS-5346 Lp(a) Lipoprotein Disorder | HRS-5965 Factor B IgAN / PNH | HRS-9821 PDE3/4 COPD | HRS-9231 MRI Contrast | HRS5580 NK1 PONV |
| Mecapegfilgrastim PEG-G-CSF CIN | | HRS-7058 KRAS G12C Solid Tumor | SHR-9539 MM | | SHR-A1912 CD79b ADC B-cell Lymphoma | ★ | HR17031 Insulin / GLP-1 T2D | HRS-7249 HL | RSS0393 PsO | HRS-9813 IPF / ILD | HRS-7450 AIS | HRS9432 Anidulafungin Derivatives Candidiasis |
| Herombopag TPO-R AA / ITP / CIT / CLD / Thrombocytopenia | ★ ★ | HRS-4508 Solid Tumor | SHR-7787 Solid Tumor | | SHR-4602 HER2 ADC (Next-gen) Solid Tumor | | HRS-7535 GLP-1 Overweight / Obesity / T2D / DKD / HF | HRS-9563 Hypertension | SHR-1139 PsO | | HRS-2129 Pain Management | HRS-5635 HBV siRNA CHB |
| Famitinib VEGFR2 / c-Kit / PDGFR CC | ★ | HRS-3738 CRBN-E3 MM / NHL | SHR-3821 Solid Tumor | | SHR-1826 c-Met ADC Solid Tumor | | HRS9531 GLP-1 / GIP Overweight / Obesity / T2D / HF / OSA / PCOS | SHR-6934 HF | HRS-7085 IBD | | HRS-4029 Acute Ischemic Stroke | HRS-2183 GNB Infection |
| Fosrolapitant and Palonosetron Hydrochloride NK-1RA / 5-HT3RA CINV | ★ | HRS-6208 Solid Tumor | SHR-9803 Solid Tumor | | SHR-4849 DLL3 ADC Solid Tumor | | SHR6508 CaSR HPT | HRS-5632 Lipoprotein Disorder | SHR-2173 SLE | | HRS-9190 Skeletal Muscle Relaxation during Induction and Maintenance of General Anesthesia | |
| SHR2554 EZH2 Lymphoma | | HRS-3802 Solid Tumor | SHR-4712 Solid Tumor | | SHR-4394 PC | | SHR-3167 Diabetes | HRS-9057 Fluid Retention | SHR-3045 Rheumatoid Arthritis | | | |
| HRS-8080 SERD BC | | HRS-6719 Solid Tumor | | | SHR-1681 Solid Tumor | | HRS-1780 Mineralocorticoids CKD | HRS-1301 HL | | | | |
| PROTAC | | | Fusion Protein | | | | | | | | | |
| HRS-5041 AR PROTAC PC | | HRS-1358 ER PROTAC BC | SHR-1701 PD-L1 / TGF-β GAC / GEJA | | SHR-4375 Solid Tumor | | HRS-4729 GLP-1 / GIP / GCG Overweight / Obesity | | | | | |
| | | | SHR-1501 IL-15 Bladder Cancer | | SHR-3792 Solid Tumor | | HRS-5817 Overweight / Obesity | | | | | |
| RDC | | | | | | | | | | | | |
| HRS-4357 PSMA mCRPC | | HRS-9815 PSMA PC Diagnosis | HRS-6768 FAP-α FAP+ Solid Tumor | | HRS-1738 Prostate Cancer PET/CT | | HRS-6213 Solid Tumor Diagnosis | | | | | |

Commercialized

NDA/BLA

Phase III

Phase II

Phase I

★ NMPA BTD / Priority Review

★ U.S. FDA FTD

★ U.S. FDA / EMA ODD

Commercialized NDA/BLA Phase III Phase II Phase I
 ★ NMPA BTD / Priority Review ★ U.S. FDA FTD ★ U.S. FDA / EMA ODD

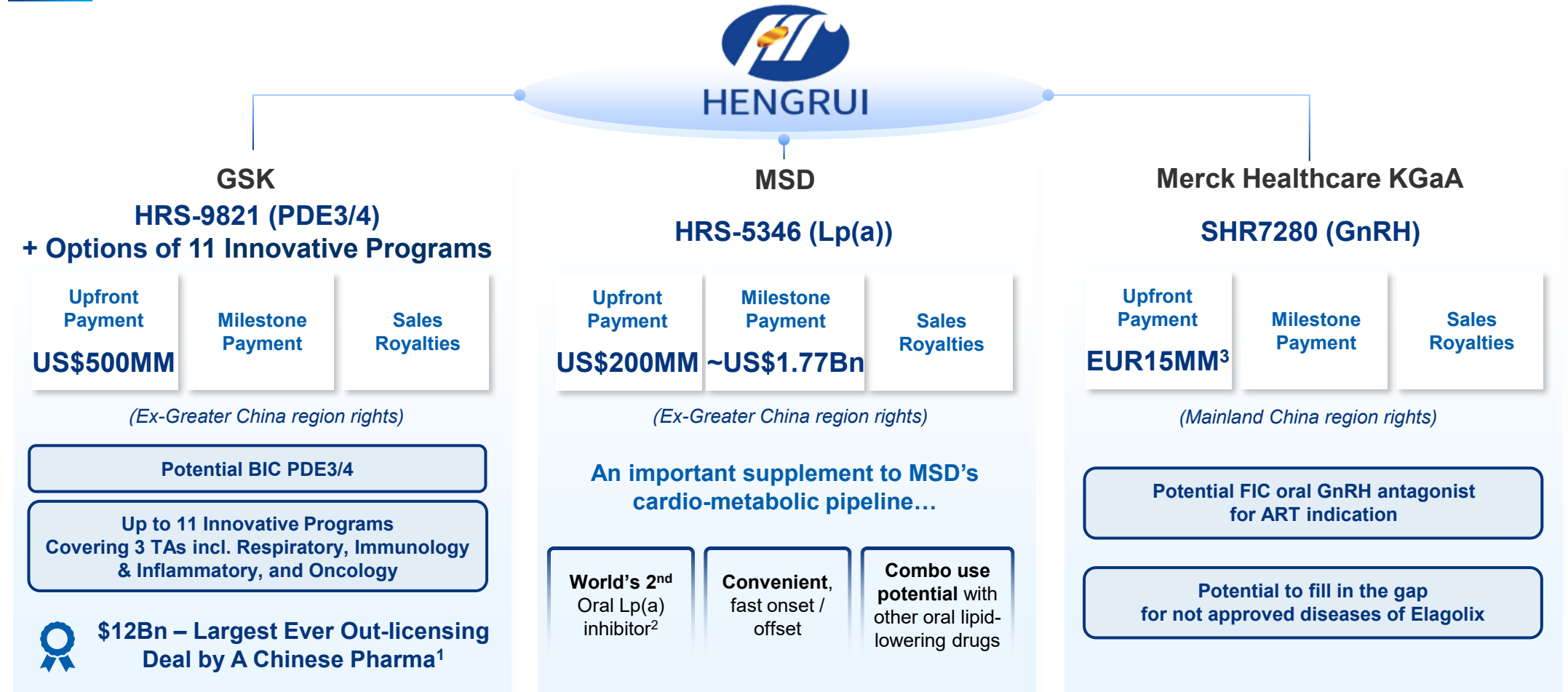


Notes: As of June 30, 2025

* A Class III drug approved in the reporting period

1. The list is non-exhaustive; 2. Clinical stage of each product / product candidate represents for its most advanced indication(s); 3. Facilitated regulatory pathways from 2018 to June 30, 2025

Business Development: Continued Strong Recognition by Global Partners



Explorations in global partnerships: From out-licensing, to NewCo and strategic partnerships, to maximize assets' global value



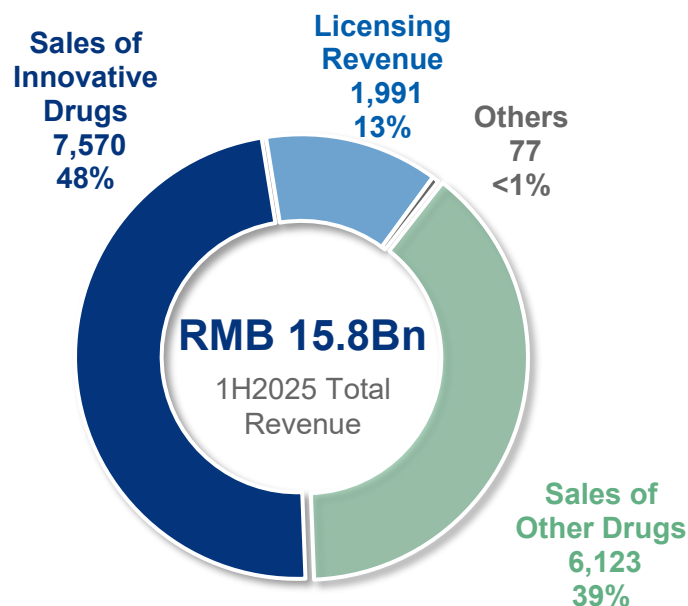
Notes: 1. In terms of total deal value of a single transaction. Total deal value include upfront payment and milestone payments, assuming all programs are optioned and all milestones are achieved; 2. Frost & Sullivan analysis based on clinical.gov disclosure for all Lp(a) drugs; 3. Out-licensed Mainland China right; upfront payment of EUR15MM, other payments not disclosed

1H2025 Financial Highlights

Continuous growth of innovative drug sales and licensing revenue with improving profitability

(RMB MM, unless otherwise stated)

Revenue



23.1%

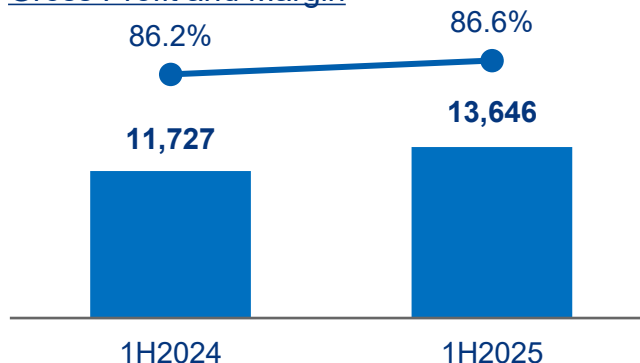
1H2024-1H2025 YoY
Sales of Innovative
Drugs

55.3%

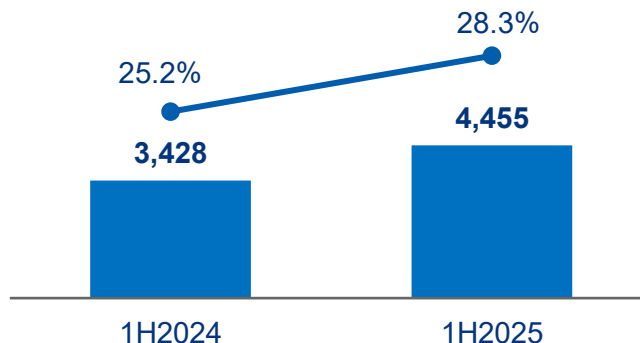
1H2025 Sales of
Innovative Drugs
as % of Total Drug Sales

Solid and Improving Profitability

Gross Profit and Margin

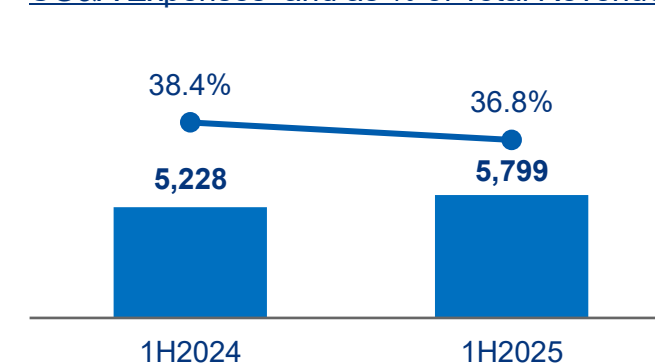


Net Profit and Margin

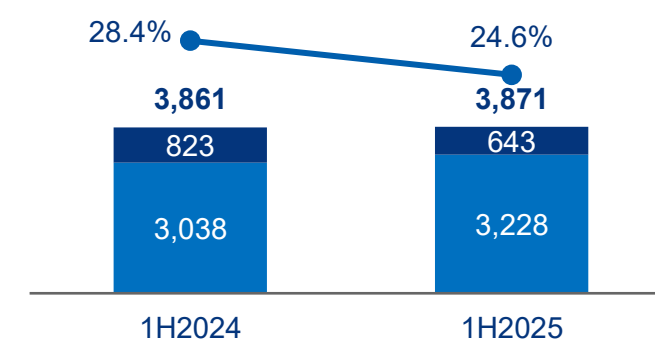


Improving Efficiency & Continuous R&D

SG&A Expenses¹ and as % of Total Revenue



R&D Expenditures² and as % of Total Revenue



■ R&D expenses

■ Capitalized R&D expenditures³



Notes: 1. Selling and distribution expenses and administrative expenses; 2. R&D expenditures = R&D expenses + capitalized R&D expenditures; 3. Capitalized R&D expenditure equals to the sum of additional and decreases of capitalized development costs

Standing at the Inflection Point



Accelerated monetization of innovative products

Entering the harvest period and new era of innovation transformation

Rapid Climbing of Innovative Drug Sales

Explosive Growth of NME Approvals



Rising Innovator

Unleash the power of in-house synergistic innovation + unparalleled R&D efficiency

Multi-pronged Approach

Comprehensive Portfolio Strategy



Game-changer

Step up for Global expansion, through partnership + in-house operation

Upsides from Valuation Uplift

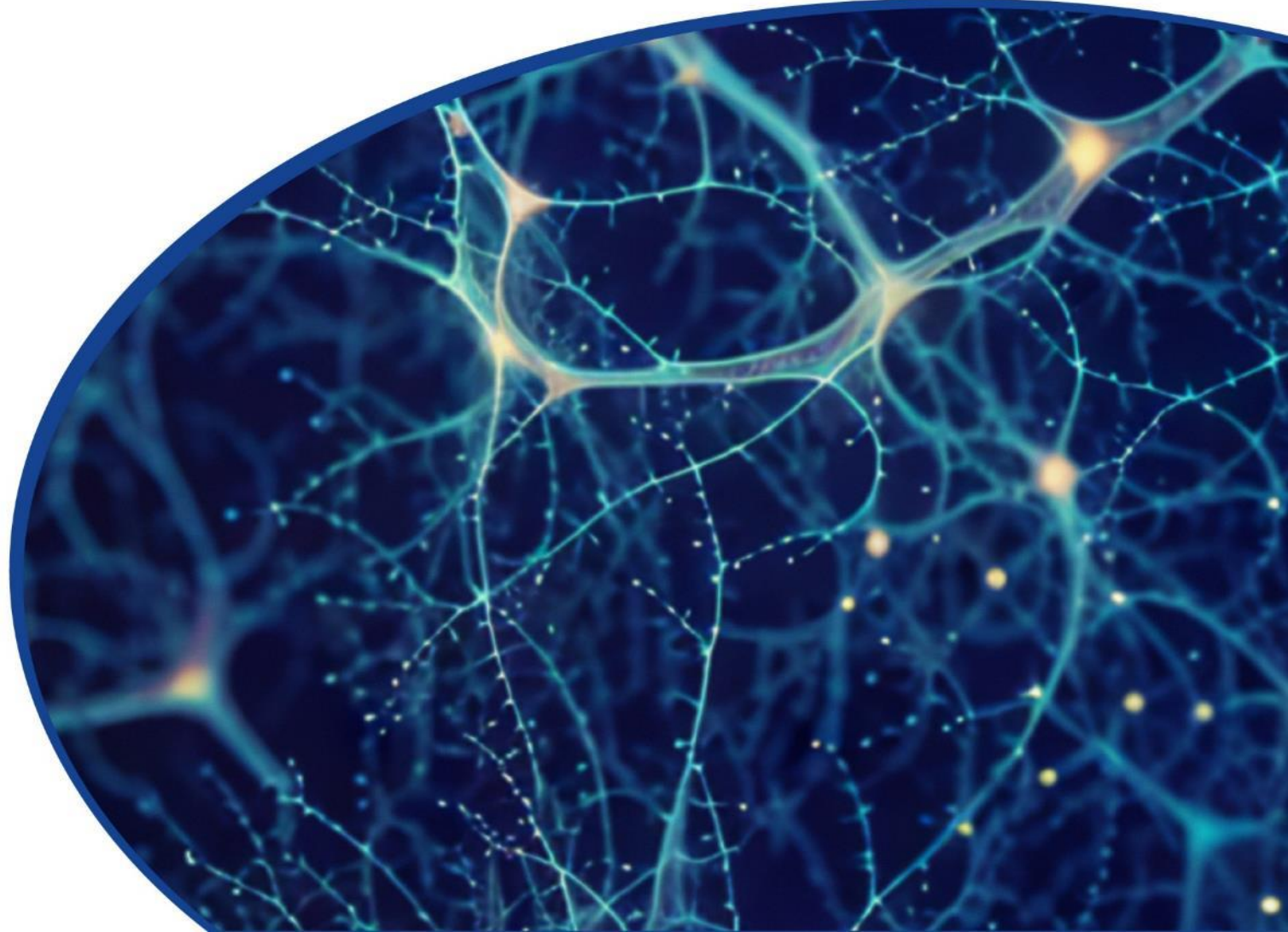
Access to Global Revenue and Global Capabilities





Clinical Updates

SECTION 2



“Hengrui Speed”: Pipeline Updates during Reporting Period

Significant progress achieved in pipeline advancement

| New to Ph1 (15) | | Ph1 -> Ph2 (22) | | Ph2-> Ph3 (10) | NDA/BLA Submission (5) | NDA/BLA Approval (12) |
|--|--|---|--|---|--|--|
| SHR-3792 Advanced Malignant Solid Tumors | HRS-6768 Advanced Malignant Solid Tumors | HRS-4508 Advanced Malignant Solid Tumors | SHR-2017 Bone Metastasis from Solid Tumor | Trastuzumab Rezetecan (HER2 ADC) HER2-expressing Platinum-resistant OC | Dalpiciclib (CDK4/6) Adjuvant Therapy for HR+/HER2- BC | Camrelizumab (PD-1) Recurrent/Metastatic CC |
| SHR-4712 Advanced Malignant Solid Tumors | SHR-9803 Advanced Malignant Solid Tumors | HRS-7058 (KRAS G12C) Advanced Solid Tumors; Colorectal Cancer | SHR-4849 (DLL3 ADC) Advanced Malignant Solid Tumors | SHR-A1912 (CD79b ADC) Relapsed/Refractory Diffuse Large B-cell Lymphoma | SHR4640 (URAT1) Primary Gout with Hyperuricemia | Famitinib (VEGFR2/c-Kit/PDGFR) Recurrent/Metastatic CC |
| HRS-6213 Solid Tumor Diagnosis | HRS-1738 Prostate Cancer PET/CT Imaging | SHR-A2102 (Nectin-4 ADC) Perioperative Non-muscle-invasive Bladder Cancer; EGFR-mut NSCLC | Trastuzumab Rezetecan (HER2 ADC) HER2+ Locally Advanced/Metastatic BTC | HRS-8080 (SERD) Breast Cancer After Endocrine Therapy | INS068 (Insulin) T2DM | Trastuzumab Rezetecan (HER2 ADC) Unresectable Locally Advanced/Metastatic NSCLC |
| SHR-4394 Prostate Cancer | HRS-6719 Advanced Malignant Solid Tumors | SHR-1826 (c-Met ADC) Advanced NSCLC | HRS9531 (GLP-1/GIP) Obesity | HRS-1893 (Myosin) Obstructive Hypertrophic Cardiomyopathy | Ivarmacitinib (JAK1 Cream) Mild-to-moderate Atopic Dermatitis | Fosrolapitant and Palonosetron Hydrochloride (NK-1RA/5-HT3RA) CINV |
| SHR-4375 Advanced Malignant Solid Tumors | HRS-3802 Advanced Malignant Solid Tumors | HRS-7535 (GLP-1) Obesity with HFpEF | HRS-1893 (Myosin) Non-obstructive Hypertrophic Cardiomyopathy | HRS-7535 (GLP-1) Overweight / Obesity | Atropine Eye Drops* (M-receptor Blocker) Delaying Myopia in Children | Recaticimab (PCSK9) Hypercholesterolemia / Dyslipidemia |
| HRS-5817 Overweight / Obesity | HRS-1301 Hyperlipidemia | HRS-5346 (Lp(a)) Lipoprotein Disorders | SHR-1819 (IL-4Rα) Children/Adolescent Atopic Dermatitis | HRS9531 (GLP-1/GIP) Obesity with Obstructive Sleep Apnea; T2DM | | Retagliptin Phosphate and Metformin Hydrochloride (DPP-4/Metformin) T2DM |
| SHR-3045 Rheumatoid Arthritis | HRS-9190 Skeletal Muscle Relaxation during Induction and Maintenance of General Anesthesia | SHR-1139 Plaque Psoriasis | Ivarmacitinib (JAK1 Gel) Non-segmental Vitiligo | SHR-2004 (FXI) Prevention of Venous Thromboembolism Following Total Knee Arthroplasty | | Vunakizumab (IL-17A) Ankylosing Spondylitis |
| HRS-4029 Acute Ischemic Stroke | | RSS0343 Non-cystic Fibrosis Bronchiectasis | RSS0393 Plaque Psoriasis | HRS-5965 (Factor B) IgA Nephropathy | | Ivarmacitinib (JAK1) Ankylosing Spondylitis; Rheumatoid Arthritis; Moderate-to-severe Atopic Dermatitis; Alopecia Areata |
| | | SHR-1905 (TSLP) Adolescent Asthma | SHR-4597 Asthma | Vunakizumab (IL-17A) Non-radiographic Axial Spondyloarthritis | | Tegileridine (MOR) Analgesia / Pain Management |
| | | Remimazolam (GABA_A) Sedation for General Anesthesia in Surgery on Children and Adolescents | HRS-8427 (Cefiderocol Derivatives) Hospital-acquired Bacterial Pneumonia and Ventilator-associated Bacterial Pneumonia | | | |



Notes: As of June 30, 2025
*Represents Class II innovative drugs

Oncology

Metabolic / Cardiovascular

Immunological / Respiratory

Neuro

Others

Zoom in Near-term Catalysts

Product / Indication launch expected in 2025-2027

12 Catalysts
Achieved

47 NDA/BLA Approvals
Expected in 2025-2027

| 2025 | | | | |
|---|---|---|---|--|
| Trastuzumab Rezatecan ¹ HER2 ADC NSCLC | ✓ | Camrelizumab + Famitinib ^{1,2} PD-1 / VEGFR, FGFR, c-kit 2L CC | ✓ | HR20031 DPP-IV/Metformin /SGLT2 T2D |
| Fosrolapitant and Palonosetron Hydrochloride NK-1RA/5-HT3RA Highly emetogenic CINV | ✓ | Recaticimab PCSK9 Hypercholesterolemia / Dyslipidemia | ✓ | |
| Retagliptin Phosphate and Metformin Hydrochloride DPP-4/Metformin T2D | ✓ | Vunakizumab IL-17A Ankylosing Spondylitis | ✓ | |
| Ivarmacitinib ³ JAK1 Moderate-to-severe AD; Ankylosing Spondylitis; Rheumatoid Arthritis; Alopecia Areata | ✓ | Tegileridine MOR Post-operative moderate-to-severe analgesia | ✓ | |
| SHR8058 ** Perfluorohexyloctane DED | ✓ | | | |

As of Today

| 2026 | |
|---|--|
| Dalpiciclib CDK4/6 Adjuvant therapy for HR+/HER2- BC | Trastuzumab Rezatecan HER2 ADC BC |
| Herombopag TPO-R CIT; Aplastic Anemia; Children/ adolescents with ITP | Adebrelimab PD-L1 NSCLC |
| SHR-1701 PD-L1/TGF-β GAC | Camrelizumab + Famitinib PD-1 / VEGFR, FGFR, c-kit 1L CC |
| SHR2554 EZH2 Lymphoma | INS068 Insulin T2D |
| SHR8028 * Cyclosporin A DED | |

| 2027 | | |
|---|---|--|
| Trastuzumab Rezatecan HER2 ADC CRC; BC | Pyrotinib EGFR / HER2 / HER4 BC | Herombopag TPO-R Hepatopathy-related thrombopenia |
| Fosrolapitant and Palonosetron Hydrochloride NK-1RA/5-HT3RA Mid emetogenic CINV | SHR-A2009 HER3 ADC NSCLC | Irinotecan * TOP1 CRC |
| HRS-8080 SERD BC | SHR-1918 ANGPTL3 Hypercholesterolemia | HRS9531 GLP-1 / GIP Overweight / Obesity; T2D |
| SHR4640 URAT1 Gout and Hyperuricemia | HR17031 Insulin/GLP-1 T2D | HRS-7535 GLP-1 T2D |
| SHR6508 CaSR SHPT | SHR-2004 FXI Postoperative Anticoagulation | Febuxostat * XOD Gout and hyperuricemia |
| Ivamacitinib JAK1 Nr-axSpA; AD (cream) | HRS-5965 Factor B Treatment-naïve PNH; Treatment- experienced PNH | Atropine Eye Drops * M-receptor Blocker Delaying Myopia in Children |
| SHR7280 GnRH Assisted Reproduction | | |



Notes: As of July 31, 2025

*Represents Class II drugs; **Represents Class III drugs

1. Conditional approval; 2. Camrelizumab (PD-1) combo with Famitinib (VEGFR, FGFR, C-kit) in 2L CC was expected to be approved in 2026, but has been granted conditional approval in 2025; 3. Ivamacitinib (JAK1) in Alopecia Areata was expected to be approved in 2026, but has received approval in 2025

Oncology

Metabolic / Cardiovascular

Immunological / Respiratory

Neuro

Others

✓ Approved Products

HRS9531 (GLP-1/GIP) Ph3 Topline Result

Ph3 Trial Design



567 Participants, of whom
531 completed the study



Mean Baseline Weight
93 kg (205lb)



48-week, once-weekly
Subcutaneous injection
at 2/4/6 mg

Positive Data Readouts with Satisfying Efficacy and Safety Profile

Superior Efficacy

Achieved a mean weight loss
of up to **19.2%**
for the 6mg-dosage group¹

Placebo

HRS9531

(1.5%)

Average
Weight Loss
of up to **17.7%**

(19.2%)

Up to **88.0%** of participants
achieved at least 5% weight loss

531 Participants

>5% weight loss

>20% weight loss

44.4%

88.0%

Favorable Safety And Tolerability Profile

Consistent Safety Profile

v.s. GLP-1-based treatments
v.s. HRS9531 Phase 2 clinical data

Mild-to-moderate TEAEs

Mostly gastrointestinal-related

Next Milestones



NDA submission for
chronic weight
management in China

kailera

Evaluation of **higher**
doses and **longer**
duration of treatment
in global clinical trials
for KAI-9531's **BIC**
potential

More data readout
expected in EASD



Note:

1. Based on the pre-specified supplementary analysis (hypothetical strategy estimand)

SHR-A2102 (Nectin-4 ADC) Ph1 Data Readout

A multicenter phase 1 trial (NCT05701709) evaluating SHR-A2102 in a variety of other advanced Solid Tumors



ORR = 35.2%¹
DCR = 84.2%¹

**SHR-A2102 demonstrated
a manageable safety
profile and promising
activity across a variety
of pretreated advanced
solid tumors**

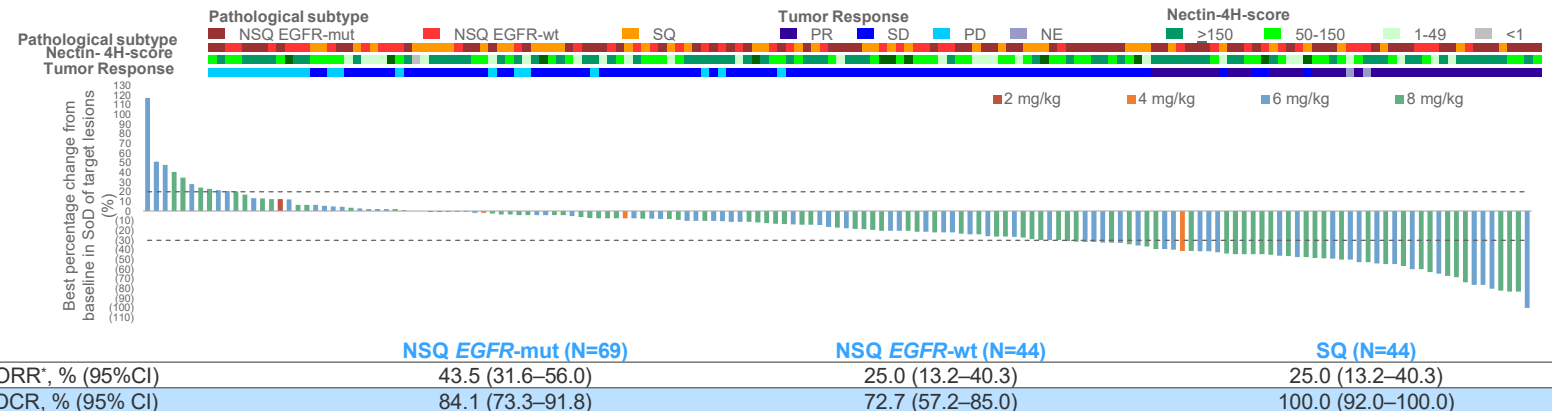
Promising Efficacy Observed across Various Solid Tumors

Response by Tumor Type

| | NSCLC | | | HR+/HER2-BC (N=20) | TNBC (N=32) | HNSCC (N=12) | All patients (N=304) |
|------------------|---------------------|-----------------------|-----------------------|-----------------------|---------------------|---------------------|-------------------------|
| | NSQ EGFR-mut (N=69) | NSQ EGFR-wt (N=44) | SQ (N=44) | | | | |
| ORR*, % (95% CI) | 43.5 (31.6–56.0) | 25.0 (13.2–40.3) | 25.0 (13.2–40.3) | 65.0 (40.8–84.6) | 56.3 (37.7–73.6) | 50.0 (21.1–78.9) | 35.2 (29.8–40.9) |
| DCR, % (95% CI) | 84.1 (73.3–91.8) | 72.7 (57.2–85.0) | 100.0 (92.0–100.0) | 85.0 (62.1–96.8) | 84.4 (67.2–94.7) | 91.7 (61.5–99.8) | 84.2 (79.6–88.1) |

Data are shown for the efficacy evaluable set. *Include unconfirmed responses.

Tumor Response in NSCLC



Data are shown for the efficacy evaluable set. *Including unconfirmed responses.



Source: ASCO Annual Meeting 2025: Phase 1 trial of SHR-A2102, a Nectin-4-directed antibody drug conjugate, in advanced solid tumors

Note: Data cutoff date December 20, 2024

1. In 304 evaluable patients


SHR-2004 (FXI) Ph2 Data Readout


Promising Ph2 results show SHR-2004 significantly reduces VTE risk with a favorable safety profile in TKA patients

Highlight & MoA

- An **anti-FXI antibody** for the prevention and treatment of arterial and venous thrombosis
- Inhibit the activation of FXI** by FXIIa with **high affinity**

Trial Design


Patients aged ≥ 40 and < 80 undergoing elective TKA


Comparing single-dose SHR-2004 (SC or IV) with enoxaparin

A phase 2 trial (NCT05752461) evaluating SHR-2004 in patients undergoing elective TKA for the prevention of VTE



Superior Efficacy

90 mg IV group achieved a **composite endpoint rate of 3.4%**, significantly **lower than control group's 27.5%** ($p=0.002$)



Favorable Safety Profile

Highest bleeding* event rate was **2.9%** (240 mg SC), compared to **4.1%** in the control group

| | SHR -2004 | | | | Enoxaparin (N=69) |
|--|------------------|------------------|------------------|------------------|-------------------|
| | 60 mg SC (N=61) | 120 mg SC (N=63) | 240 mg SC (N=63) | 90 mg IV (N=59) | |
| Primary Outcome, n (%) | 13 (21.3) | 6 (9.5) | 7 (11.1) | 2 (3.4) | 19 (27.5) |
| P Value of noninferiority of SHR-2004 to enoxaparin | 0.156 | 0.003 | 0.002 | 0.0001 | |
| P value of superiority of SHR-2004 to enoxaparin | 0.710 | 0.047 | 0.029 | 0.002 | |
| Major VTE and all-cause death, n (%) | 2 (3.3) | 0 | 0 | 0 | 3 (4.3) |
| Risk difference of SHR-2004 vs. enoxaparin, (95% CI) | -0.1 (-7.0, 6.7) | -2.3 (-6.1, 1.6) | -3.4 (-7.9, 1.1) | -3.1 (-8.6, 2.3) | |
| P value of SHR-2004 to enoxaparin | 0.967 | 0.246 | 0.137 | 0.254 | |

| | SHR -2004 | | | | Enoxaparin (N=74) |
|---|-------------------|-------------------|------------------|-------------------|-------------------|
| | 60 mg SC (N=67) | 120 mg SC (N=69) | 240 mg SC (N=68) | 90 mg IV (N=63) | |
| Major bleeding or clinically relevant nonmajor bleeding, n (%) | 0 | 1 (1.4) | 2 (2.9) | 1 (1.6) | 3 (4.1) |
| 95% CI | (0, 5.4) | (0, 7.8) | (0.4, 10.2) | (0, 8.5) | (0.8, 11.4) |
| Risk difference of SHR-2004 vs. enoxaparin, (95% CI) | -4.1 (-11.5, 1.6) | -2.6 (-10.1, 4.2) | -1.1 (-9.2, 6.6) | -2.5 (-10.0, 5.2) | |
| P value of SHR-2004 to enoxaparin | 0.247 | 0.621 | 1.000 | 0.624 | |
| Any Bleeding, n (%) | 17 (25.4) | 17 (24.6) | 25 (36.8) | 17 (27.0) | 25 (33.8) |

Safety outcomes were assessed in the safety population



Source: EFFORT 2025: SHR-2004, A Novel Humanised Monoclonal Antibody Targeting Factor XI (FXI), For Preventing of Venous Thromboembolism (VTE) In Patients Undergoing Elective Unilateral Total Knee Arthroplasty: A Multicenter, Randomized, Active-Comparator-Controlled Phase 2 Study
Note: * Major bleeding or clinically relevant nonmajor bleeding

Ivarmacitinib (JAK1) Ph3 Data Readout for Alopecia Areata

Demonstrated promising efficacy and safety profile for moderate-to-severe alopecia areata



Trial Design

- Patients were randomized (1:1:1) to receive daily oral ivarmacitinib (4 mg or 8 mg) or placebo for 24 weeks, followed by a 28-week double-blind extension phase
- After week 24, placebo patients were re-randomized (1:1) to receive ivarmacitinib (4 or 8 mg)



Primary Endpoint

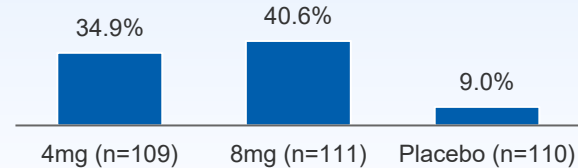
- The proportion of patients achieving a Severity of Alopecia Tool (SALT) score ≤ 20 (representing $\leq 20\%$ scalp hair loss) at week 24



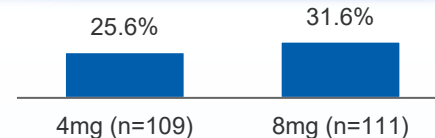
Trial Results



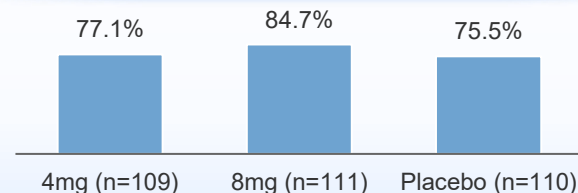
% of Patients Achieved a SALT Score ≤ 20 at Week 24



Response Rate vs. Placebo



Treatment-emergent Adverse Events¹



Conclusion

- Ivarmacitinib** demonstrated **significant efficacy** and **safety profile** in patients with severe alopecia areata at 4 mg and 8 mg dosages



Upcoming Data Readout in 2H 2025

Published

2025H1

AAD

Ivamacitinib
JAK1
Ph3 in alopecia
areata

AACR

**Trastuzumab
Rezatecan**
HER2 ADC
Ph2 in advanced
HER2-mutant
NSCLC

ASCO

Dalpiciclib
CDK4/6
Ph3 in adjuvant
therapy for BC

SHR-A2102
Nectin-4 ADC
Ph1 in advanced
solid tumors

SHR-1826
c-MET ADC
Ph1 in advanced
solid tumors

SHR-A1912
CD79b ADC
Ph1b/2 in r/r
DLBCL

EFORT

SHR-2004
FXI
Ph2 in VTE
Following TKA

EHA

SHR-2554
EZH2
Pivot study in r/r
PTCL

Herombopag
TPO-R
Ph2 in non-severe
aplastic anemia

ADA

HRS9531
GLP-1/GIP
Ph2 in T2DM /
Overweight / Obesity

SHR-7535
GLP-1
Ph2 in T2DM &
Obesity

ESHRE

SHR-7280
GnRH
Ph3 in ART

In plan

2025H2

ESC

SHR-2004
FXI
Ph1 in atrial fibrillation

HRS-1893
Myosin
Ph1 in HCM

WCLC

SHR-4849
DLL3 ADC
Ph1 in SCLC

Adebrelimab
PD-L1
Ph1b/3 in
NSCLC

EASD

HRS9531
GLP-1/GIP
Ph2 in Obesity/Overweight

INS068
Insulin
Ph3 in T2DM

HRS-7535¹
GLP-1 (oral)
Ph2 in T2DM

EADV

RSS0393
Ph1 in
Psoriasis

ESMO

HRS-7058
KRAS G12C
Ph1 in advanced
solid tumors

HRS-4642
KRAS G12D
Ph1 in advanced
solid tumors; Ph1b/2
in Pancreatic Cancer

**Trastuzumab
Rezatecan**
HER2 ADC
Ph1b/2 in BC

HRS-5041
AR PROTAC
Ph1 in mCRPC

Fuzuloparib
PARP1/2
Ph3 in Ovarian
Cancer





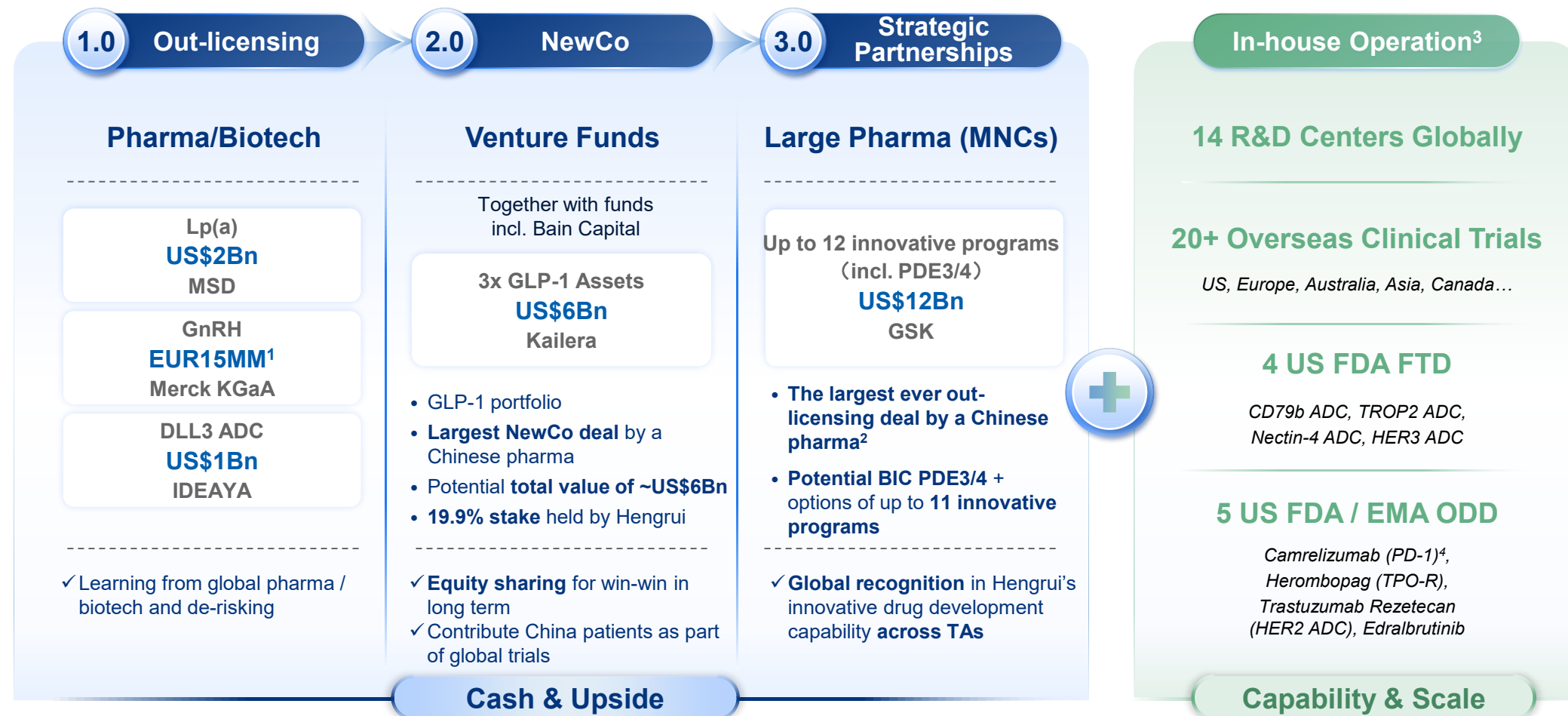
Globalization

SECTION 3



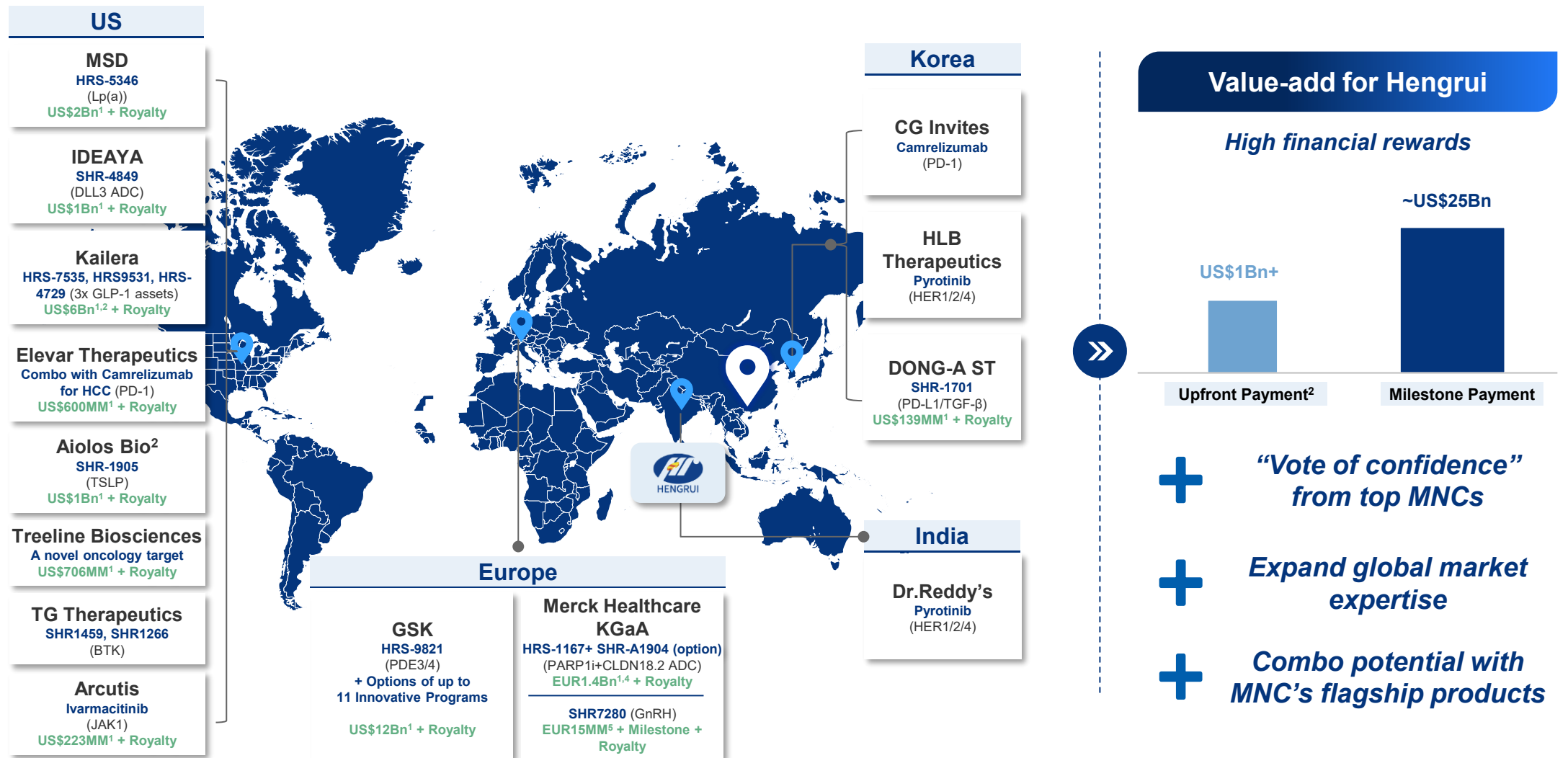
Global Partnership Models and In-house Capabilities to Maximize the Impact of Innovation

Driving global growth with flexible models



Notes: 1. Out-licensed Mainland China right; upfront payment of EUR15MM, other payments not disclosed; 2. In terms of total deal value of a single transaction. Total deal value include upfront payment and milestone payments, assuming all programs are optioned and all milestones are achieved; 3. As of July 31, 2025; 4. Camrelizumab (PD-1) was granted both US FDA and EMA ODDs

Out-licensing / NewCo: Strong Track Record (since 2018)



Notes: As of July 31, 2025

¹. Total deal value, including upfront payment and potential milestone payments; ². Excluding the value of 19.9% equity interest in Kailera; ³. Aiolo Bio was acquired by GSK in Feb 2024; ⁴. Including an option exercisable for SHR-A1904; ⁵. Out-licensed Mainland China right, upfront payment of EUR15MM, other payments not disclosed

Business Development Case Studies: Continued Strong Recognition by Global Partners

Adhering to the dual strategy of in-house R&D and open collaboration to extend presence in overseas markets, integrate more deeply into the global innovation network, and maximize product value



The Largest Ever Out-licensing Deal by A Chinese Pharma

in terms of total deal value of a single transaction

Upfront payment of
US\$500MM



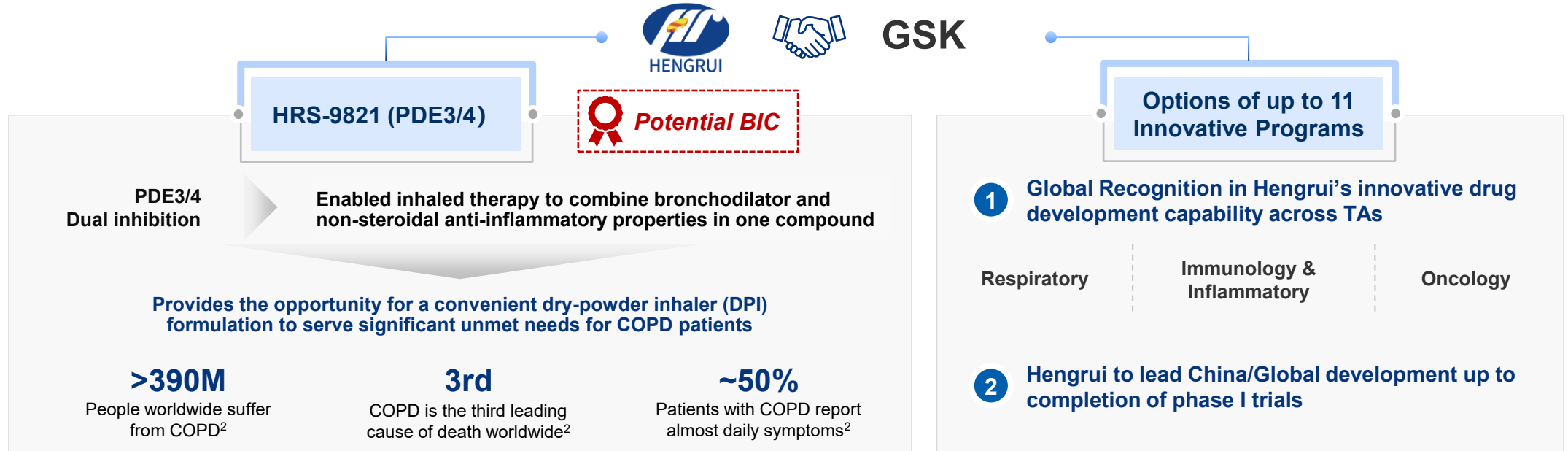
Milestone payment



Tiered Royalties



Total deal value of
~US\$12.0Bn¹



Notes:
1. if all programs are optioned and all milestones are achieved
2. Market data from Verona Pharma website

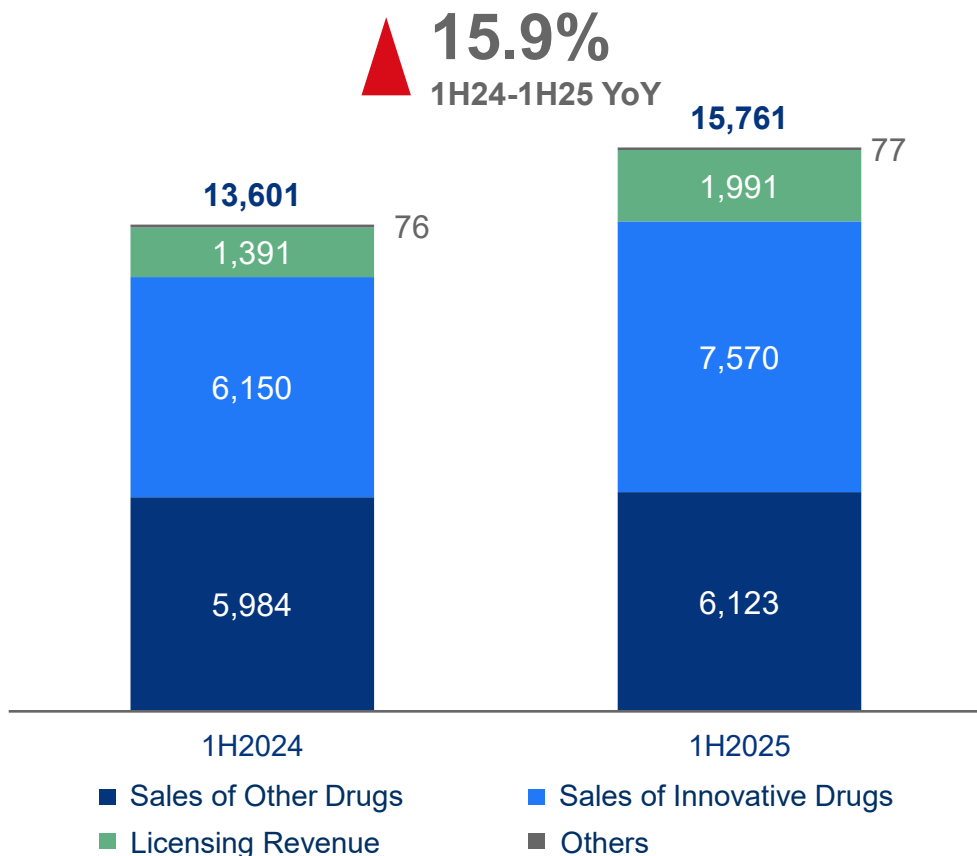
Financials

SECTION 4

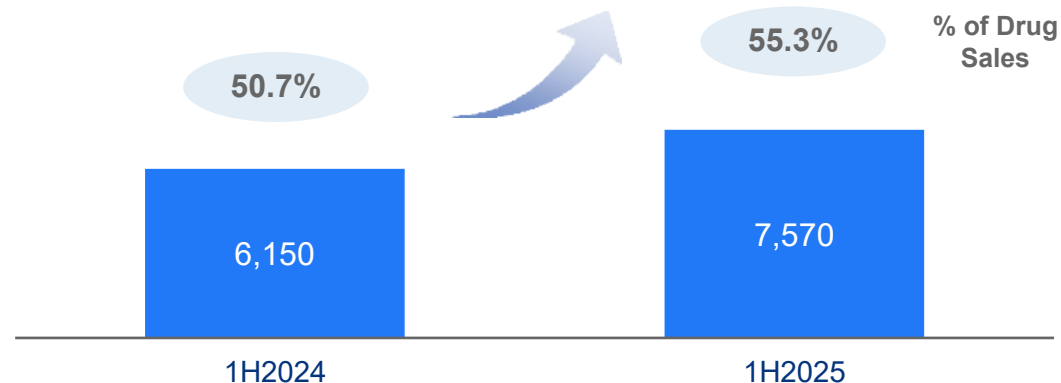
Rapid Revenue Growth

The continuous growth in our total revenue during 1H2025, with increasing revenue from our innovative drugs and recurring licensing revenue

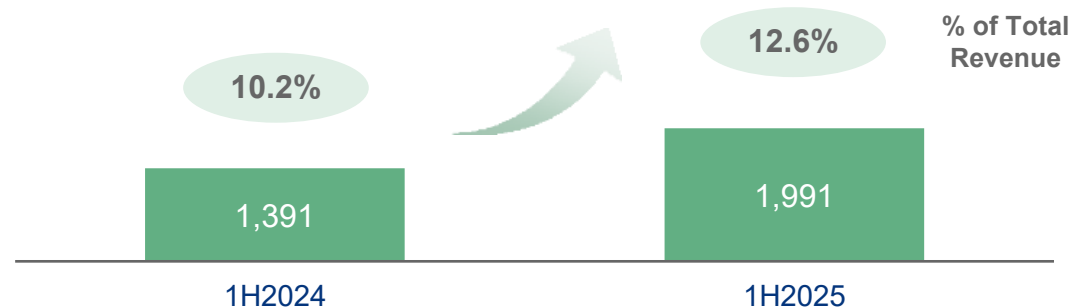
Revenue
RMB MM



Sales of Innovative Drugs
RMB MM



Recurring and Growing Licensing Income
RMB MM

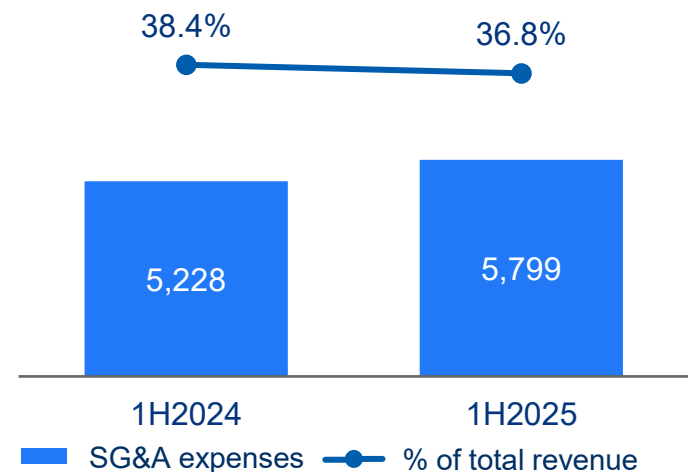


Improving Operating Efficiency Enabling Further Dedication to Innovation

SG&A expenses have been decreasing relative to revenue due to effective cost control policies, leading to higher profitability, while continuous R&D expenditures demonstrated our strong commitment to innovation

SG&A Expenses¹

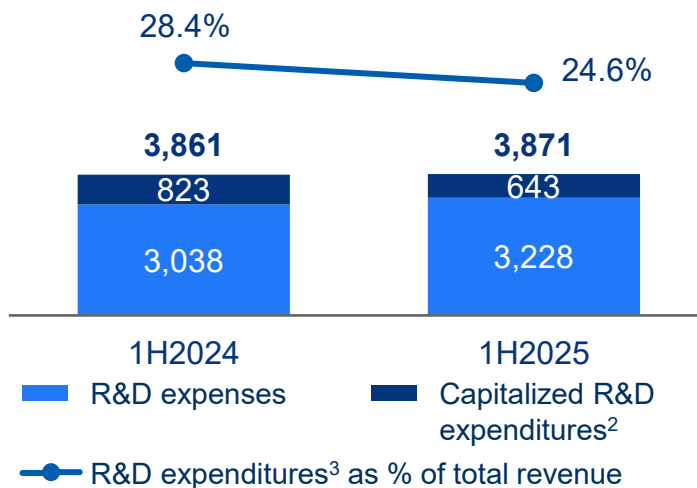
RMB MM



- ↑ Higher costs related to new products' marketing and business expansion
- ↓ Improved licensing revenue and SG&A efficiency

Research and Development Expenditures

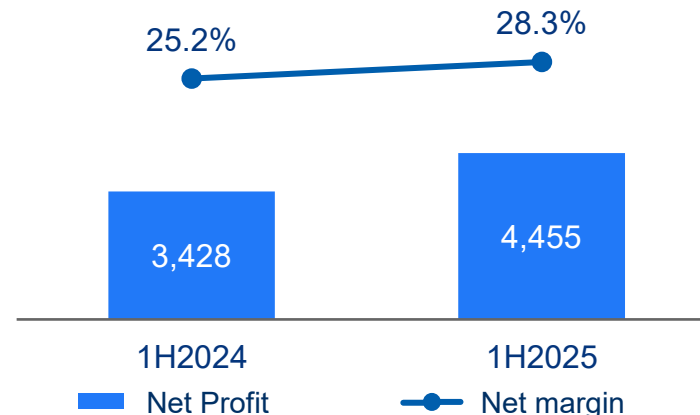
RMB MM



- ↑ Continuous R&D investments in innovative product candidates

Net Profit

RMB MM



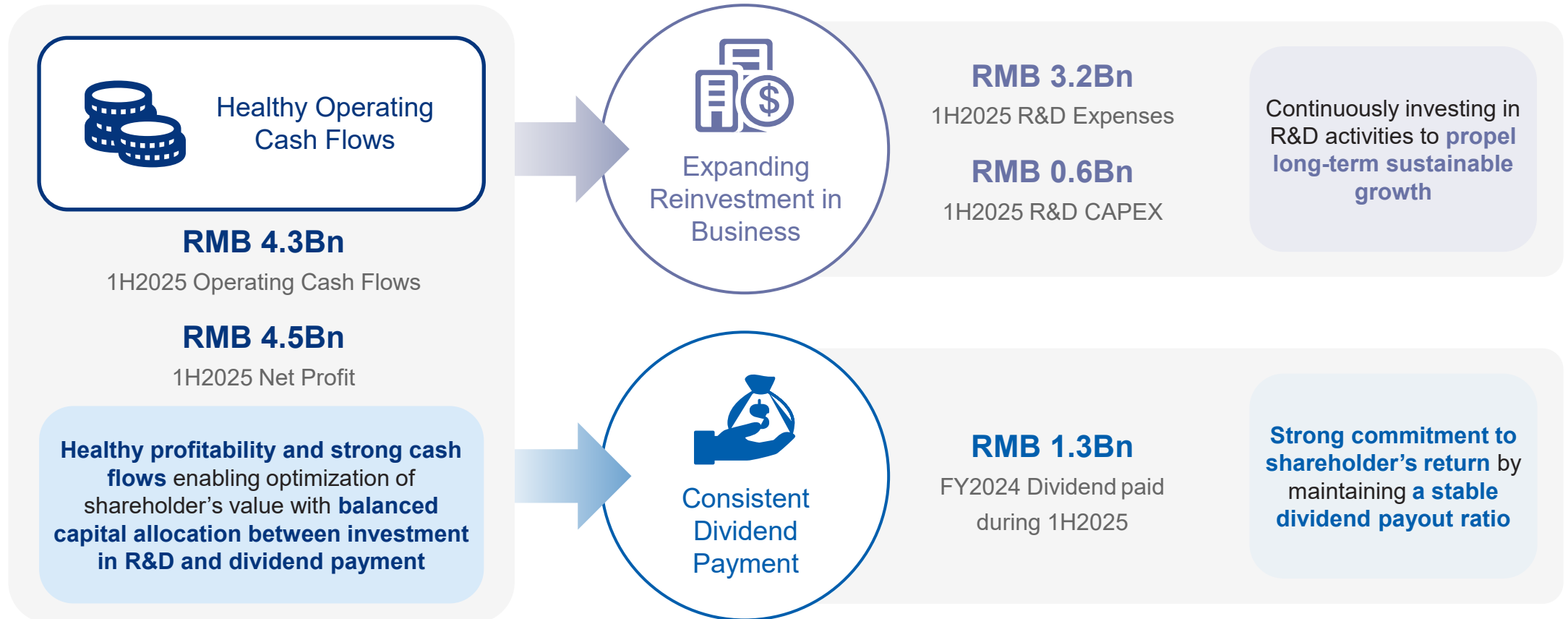
- ↑ Higher gross profit margin
- ↑ Improved operating efficiency



Notes: 1. Selling and distribution expenses and administrative expenses; 2. Capitalized R&D expenditure equals to the change of capitalized development costs for the period; 3. R&D expenditures = R&D expenses + capitalized R&D expenditure

Balanced Capital Allocation to Enhance Shareholder's Value

Healthy operating cash flows enable us to continuously invest in R&D and steadily distribute dividend to our shareholders, enhancing shareholder's return and long-term value



1H2025 Financials Highlights

| RMB MM | 1H2025 | % Revenue | % Drug Sales | 1H2024 | % Revenue | % Drug Sales | % YoY |
|---------------------------|---------|-----------|--------------|---------|-----------|--------------|----------|
| Sales of Innovative Drugs | 7,570 | 48.0% | 55.3% | 6,150 | 45.2% | 50.7% | ↑ +23.1% |
| Sales of Other Drugs | 6,123 | 38.8% | 44.7% | 5,984 | 44.0% | 49.3% | +2.3% |
| Total Drug Sales | 13,693 | 86.9% | 100.0% | 12,134 | 89.2% | 100.0% | ↑ +12.8% |
| Licensing Revenue | 1,991 | 12.6% | | 1,391 | 10.2% | | ↑ +43.2% |
| Others | 77 | 0.5% | | 76 | 0.6% | | 2.2% |
| Total Revenue | 15,761 | 100.0% | | 13,601 | 100.0% | | ↑ +15.9% |
| Less: Cost of Revenue | (2,115) | 13.4% | | (1,873) | 13.8% | | +12.9% |
| Gross Profit | 13,646 | 86.6% | | 11,727 | 86.2% | | ↑ +16.4% |
| % Gross Profit Margin | 86.6% | | | 86.2% | | | |
| Less: R&D Expenses | (3,228) | 20.5% | 23.6% | (3,038) | 22.3% | 25.0% | +6.3% |
| Less: SG&A Expenses | (5,799) | 36.8% | 42.4% | (5,228) | 38.4% | 43.1% | +10.9% |
| Plus/Less: Others | 432 | 2.7% | 3.2% | 290 | 2.1% | 2.4% | +49.2% |
| Profit before Tax | 5,051 | 32.0% | | 3,752 | 27.6% | | ↑ +34.6% |
| Less: Income Tax Expenses | (596) | 3.8% | | (323) | 2.4% | | +84.3% |
| Net Profit | 4,455 | 28.3% | | 3,428 | 25.2% | | ↑ +29.9% |
| % Net Profit Margin | 28.3% | | | 25.2% | | | |
| EPS (RMB) | 0.70 | | | 0.54 | | | ↑ +29.6% |



Note: Unaudited